

PTO/SB/21 (01-08)

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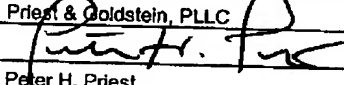
TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/659,661
	Filing Date	Sep 10, 2003
	First Named Inventor	Roquemore, John Peter
	Art Unit	2635
	Examiner Name	Au, Scott D.
Total Number of Pages in This Submission	Attorney Docket Number	500.0290

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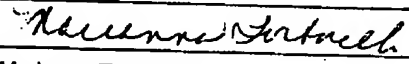
ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): PTO 2038 Credit Card Form
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Priest & Goldstein, PLLC		
Signature			
Printed name	Peter H. Priest		
Date	April 28, 2008	Reg. No.	30210

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature			
Typed or printed name	Marianna Tortorelli	Date	April 28, 2008

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
BEFORE THE BOARD OF PATENT APPEALS AND INTERFERENCES

In re Application of : Roquemoire
For : Dual-Communication Electronic
Serial No. : Shelf Label System and Method
10/659,661
Filed : 09/10/2003
Group : 2635
Examiner : Au, Scott D.

Durham, North Carolina
April 28, 2008

MAIL STOP APPEAL BRIEF – PATENTS
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL OF APPELLANT'S BRIEF

Dear Sirs:

1. Transmitted herewith is the APPEAL BRIEF in this application with respect to the Notice of Appeal filed on February 26, 2008.
 2. The Applicant is other than a small entity.
 3. Pursuant to 37 CFR 1.17(f) the fee for filing the Appeal Brief is \$510.00.
- [x] The Commissioner is hereby authorized to charge the fee of \$510 to NCR Corporation Deposit Account No. 14-0225.

04/28/2008 PCHOMP 00000032 140225 10659661

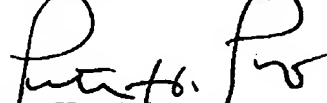
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- ☐ The Commissioner is hereby authorized to charge the ___ month extension of time fee of ___ to our credit card. The letter petitions for a two month extension of time. A copy of credit card form PTO 2038 is enclosed.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required or credit any overpayment to NCR Corporation Deposit Account No. 14-0225.

Respectfully submitted,



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